;843 228 3840

2014-41-T
249560
Mail or fax a copy to:

CLASS C AMENDMENT FORM

File the original with: Public Service Commission of South Carolina Clerk's Office **Motor Carrier Matters** P.O. Box 11549 Columbia, S.C. 29211 (803) 896 - 5100

S.C. Office of Regulatory Staff Transportation Department 1401 Main Street, Suite 900 Columbia, S.C. 29201 (803) 737-0578 FAX (803) 737-0815

FAX (803) 896-5199 MAR 19 2014 DATE: 2014 03/9 TRANS DEPT I have the following Certificate: Class C Taxi # _____ Class C Charter # 2019-15-/ Class C Charter Bus #____ Class C Non-Emergency# Please consider this as my request for the following amendment(s) to my Oet Name Change From: Carolina Palmetto Car Servie UCDBA:

(Current Name)

(Current DBA if applicable)

TO: Carolina Palmetto Car Servic UCDBA:

(New Name)

(New DBA if applicable) Scope of Authority From: To:____ (Current Scope) Passenger Limit From: To: (Current Limit Number) (New Limi Name & DBA if DBA is applicable)

Caroline Palmetts Car Service UC DBA CP Car Service 167 Second STREET

(Street and/or Mailing Address) Beaufort, SC, 29902 (City, State, Zip Code) (Signature) (Title) Owner, President, etc. 770-364.7659

03-18-14;12:17PM;

843 228 3840

A Please Consider to ammend to application

for name charge. Application Should read

Carolina Parlmetts Car Service LCC OBA CA Car Serve

tinck Garcis

ale 2011

Owner

20140319

RECEIVED

MAR 19 2014

TRANS DEPT